

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS     | ID NO. | DATE     |
|---------------------------|--------------|--------|----------|
| FEE DETERMINATION         | <i>David</i> |        | 15-02-01 |
| O.I.P.E. CLASSIFIER       | <i>CV</i>    | 503    | 5-26-01  |
| FORMALITY REVIEW          |              |        | 06-26-01 |
| RESPONSE FORMALITY REVIEW |              |        |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     | ✓     | ✓        |      |
| 2     | ✓     | ✓        |      |
| 3     | ✓     | ✓        |      |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

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6/26/01